<u>~</u>	<i>"</i>									10	1//	163	159		
PATENT APPLICATION FEE DETERMINATION RECO									Application or Docket Number C2005 C7 - C5501						
		CLAIMS A	S FILED - PART I (Column 1) (Column 2)				-	SMALL ENTITY				OTHER THAN			
TOTAL CLAIMS			- (Colum	30_1)	(Coh	umn 2)	TYPE			OR SMALL ENTITY					
FOR		NUMBER FILED		NUM	IMBER EXTRA		RATE BASIC FEE 3		FEE 375.00	-{	RATE	FEE			
TOTAL CHARGEABLE CLAIMS			7 minus 20=		•	16				373.00	JOR	BASIC FEE	750.00		
INDEPENDENT CLAIMS			7 minus 3 =		•			X\$ 9=			OR	X\$18=			
MULTIPLE DEPENDENT CLAIM P			RESENT			<u> </u>	X42=			OR	X84=				
* If the difference in column 1 is			less than	tera onto:	*****		+140=			OR	+280=				
			MENDED - PART II			wiumn 2	TOTAL				OR	TOTAL	1078.		
(1)	7/05	(Column 1)		U - PAH (Colun		(Catumn 3)	١	SMAL	LE	NTITY	OR	OTHER SMALL	THAN		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO	BER	PRESENT EXTRA		RATE	1	ADDI- TIONAL		RATE	ADDI- TIONAL		
	Total	•	Minus	PAIDE	-OR	-	ł	\	+	FEE			FEE		
ME	Independent	. 2	Minus	17	7) 1		l	X\$ 9=	+		OR	X\$18=			
	FIRST PRES	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM			X42=	-		OR	X84=			
2	4/19	16						+140=	<u>/</u>		OR OR	+280= JOTAL ADDIT, FEE			
	1101	(Column 1)	3	(Colum		(Column 3)						-DOIN FEE			
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA	1	RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	.36	Minus	· 3	6	= /		X\$ 9=	T		óR	X\$18=			
	Independent FIRST PRESE	NTATION OF MU	Minus	ANA C	3	· /		X42=	t		OR	X84=	/		
		·	CHIPCE DE	PENDENI (CLAIM	- / -		+140=	†		•	+280=	/- -		
		•				(ı	YOTAL			OR L	TOTAL	/		
	•	(Column 1)		(Columi	n 2)	(Column 3)	•	ADDIT. FEE	<u> </u>	/ -J	OR A	DOIT. FEEL			
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE: NUMBE PREVIOU PAID FO	ST ER ISLY	PRESENT EXTRA		RATE	TI	DDI- ONAL	ſ	RATE	ADDI- TIONAL		
AMENDMENT	Total	•	Minus		$\neg \neg$	=	ł	X\$ 9=	۲	FEE	_}	X\$18=	FEE		
	Independent	•	Minus	***		B .	ł	X42=	╀		DR				
	FIRST PRESE	ł	A428	┞	— - '	DR _	X84=								
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20.* **TOTAL.** **TOTAL.*											DA L	+280=			
••••[the "Highest Nur	nber Previously Pai mber Previously Pai ber Previously Paid	d For IN THIS	SPACE IS 16	ess than	20, enter *20.*	A four	TOTAL DOIT. FEE nd in the ap			DR AL	TOTAL DDIT. FEE			
_	7TO-875 (Pay 12											- ••			